State of Alaska FY2008 Governor's Operating Budget

Department of Health and Social Services Women, Children and Family Health Component Budget Summary

Component: Women, Children and Family Health

Contribution to Department's Mission

The Department's mission is to promote and protect the health and well being of Alaskans. The mission of the Women, Children and Family Health (WCFH) component is to promote optimum health outcomes for all Alaskan women, children and their families by providing leadership and coordination with primary health care providers and public entities within the state's health care systems to develop infrastructure and access to health services; and delivering preventative, rehabilitative and educational services targeting women, children and families.

Core Services

Major program components address four primary populations: pregnant women and infants; women across the lifespan; children and adolescents; and children with special health care needs. The oral health program is inclusive of all adults and children. Specifically, the programs in Women, Children and Family Health (WCFH) are divided into three units:

Women's Health Unit

Breast and Cervical Health Check (BCHC) Family Planning

Perinatal Health

Children's Health Unit

Oral Health for Children and Adults

Newborn Metabolic Screening

Early Hearing Detection, Treatment and Intervention Program

Specialty Clinics

Genetics and Metabolic Clinics

Maternal & Child Health (MCH) Epidemiology Unit

Pregnancy Risk Assessment and Monitoring Program

Maternal and Infant Mortality Review Committee

Alaska Birth Defects Registry

Fetal Alcohol and Surveillance

MCH Indicators

State Systems Development Initiative

Heliobactor Pylori Research Program

WCFH core services utilize the core public health MCH pyramid as a guide. The core services outlined within the four levels of the pyramid include:

- Infrastructure building activities, including needs assessment; evaluation; planning; policy development; quality assurance monitoring; training and applied research.
- Population building activities, including newborn metabolic and hearing screening; immunizations; sudden infant death counseling; shaken baby prevention; oral health; injury prevention; nutrition; outreach and public education.
- Enabling activities, which include translations services, outreach and health education, family support and navigation services, purchase of health insurance, case management and coordination with Medicaid, and collaboration with the Women, Infants and Children program (WIC) and early intervention services.
- Direct health service activities such as genetics and newborn metabolic clinics; specialty clinics such as neurology, neurodevelopmental and cleft lip and palate clinics; family planning services; and breast and cervical cancer screening services.

FY2008 Resources Allocated to Achieve Results				
FY2008 Component Budget: \$8,864,200	Personnel: Full time	43		
	Part time	1		
	Total	44		

Key Component Challenges

Women's Health

Breast and Cervical Health Check (BCHC)

An increasing caseload and static funding will be this program's greatest challenge. Close monitoring of the number of claims processed, expenditures, and enrollment on a monthly basis through the first quarter of FY07 will allow us to predict future growth potential for the remainder of the fiscal year. Decisions on adjusting eligibility guidelines will be determined before the end of the calendar year. The ability to recruit new medical providers in areas of the state that have scant coverage will be a challenge. If the demand for the BCHC services continues at the current rate, the program may need to limit enrollment to women ages 30 and above to respond to the increased demand. If this happens, it will no longer be operating in congruence with the other four National Breast & Cervical Cancer Early Detection programs funded in Alaska and operated by native health corporations (Southcentral Foundation, Arctic Slope Native Association, Yukon-Kuskokwim Health Corporation, and Southeast Alaska Tribal Health Consortium). Each of these organizations enrolls women ages 18 and up.

Addressing the technology gap between the emerging new technology in laboratory and diagnostic imaging and the program's resources and policies will continue to be a challenge. For example, for at least 4 years, the CDC has not supported the program in reimbursing for new liquid-based Pap smears, so laboratories and medical providers must choose between providing this service at a financial loss or providing a different product/service to lower income clients than to privately insured clients.

Family Planning

An on-going challenge continues to be the rapidly increasing costs of pharmaceuticals. In addition, there may be a need for additional nurse practitioner (ANP) contracts for family planning (FP) services administered through this component. A reduction in availability of family planning services across the state has resulted in an increase in out-of-wedlock and teen births in some areas of the state.

Children's Health

Newborn Metabolic Screening

The Alaska Newborn Metabolic Screening Program screens newborns for diseases not apparent at birth because very early treatment can prevent or reduce physical effects and brain damage. The program continues to work with providers who do not support a first specimen to be drawn prior to discharge from the hospital, although this number has sharply decreased over the past year. Education about the testing process, including proper specimen collection and shipment to the appropriate testing facility, will be a focus this year. In addition, an advisory committee has decided to include Cystic Fibrosis in the screening panel; it will be added beginning Jan. 1, 2007. Additional days for genetics and metabolic clinics are in demand as the science of genetics worldwide becomes better defined. This has put increasing pressure on the genetics and metabolic clinics which are experiencing ever-growing waiting lists.

Pediatric Specialty Clinics

Maintaining equity in access to services for children with special health care needs continues to be a challenge in the face of declining dollars. Development of an infrastructure that will support privatization of services and yet maintain quality and access outside of the major urban areas will require long-term planning and a base of on-going financial support.

Genetics and Birth Defects Clinics

Most states have enacted genetics laws to restrict health insurance discrimination, but Alaska has not. Patients and physicians have increasing concerns about discrimination (insurance, employment) based on genetic test results, a genetic diagnosis, and confidentiality of genetic information; this impedes uses of genetic services.

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Oral Health for Children and Adults

The Oral Health program promotes better oral health in Alaska through the collection and analysis of data, formation of a statewide working group, support of water fluoridation and dental sealant programs and development of a comprehensive oral health plan for the state. Oral health screenings by the Indian Health Service have demonstrated high rates of dental decay in child and adult Native populations. These issues are compounded by limited access to dental services, small water systems and lack of certified water operators for fluoridation of drinking water, and diets that promote dental decay (such as high consumption of soda). In addition, the Alaska dental labor force is aging and many dentists are nearing retirement.

Access to dental services under the Medicaid/Denali KidCare program is limited in a number of urban areas in Alaska.

Water fluoridation, while acknowledged as one of the ten major public health achievements of the 20th century, still faces active opposition in some communities.

MCH Epidemiology

Key programs that provide critical maternal-child data, such as the Pregnancy Risk Assessment and Monitoring System (PRAMS), Maternal Infant Mortality Review (MIMR), Child Death Review Team, and Birth Defects/FAS surveillance, are facing funding pressures with virtually no dollars available from specific federal grants. In addition, there is a high demand for data analysis for maternal-child issues in such areas such as asthma, child abuse, statutory rape, teen and out-of-wedlock pregnancies, preterm and low birth weights, and neonatal infections.

Significant Changes in Results to be Delivered in FY2008

Women's Health

Women, Children, and Family Health (WCFH), in collaboration with the Division of Public Assistance, will resume a public and professional educational effort to reduce the incidences of statutory rape and encourage teens to engage in healthy decision making regarding relationships.

Children's Health

With the passage of HB 109 for newborn hearing screening, regulations are in development to facilitate full implementation by January 1, 2008.

In collaboration with the Alaska Mental Health Trust Authority, the Department is working on regulations to support an Adult Medicaid Dental Program to a preventive model. In addition, during FY07, a water fluoridation program will be developed as well as a dental sealant program targeting high-risk school age children.

MCH Epidemiology

During the later half of FY07 and into FY08, a survey of mothers of toddlers will be initiated using the same survey framework as the Pregnancy Risk Assessment and Monitoring (PRAMS) system. This survey will provide a wealth of health, education and developmental information to be used in program evaluations and as health status indicators. There are currently no other sources of information being collected in this manner for this population.

The Maternal Infant Mortality Review and Child Death Review committees will publish the results of their reviews.

Major Component Accomplishments in 2006

Of all newborns, 99.9 percent were screened for metabolic conditions.

Approximately 90 percent of newborns were screened for hearing.

Second and third editions of the Maternal & Child Health (MCH) Data Books on Pregnancy Risk Assessment and Monitoring System (PRAMS) data and Birth Defects were published.

Statutory and Regulatory Authority

AS 08.36.271	Dentist Permits for Isolated Areas
AS 40.25.125	Public Records

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AS 18.05.010-070 Administration of Public Health and Related Laws
AS 18.15.200 Disease Control and Threats to Public Health

AS 18.16.010 Regulation of Abortions AS18.50.010/.30/.40 Vital Statistics Act

AS 44.29.020 Department of Health & Social Services

AS 47.20 Services for Developmentally Delayed or Disabled Children 7AAC27.005-.900 Preventative Medical Services (Include Birth Defects Registry)

7AAC 78.010-.320 Grant Programs

7AAC 27.510-590 Screening of Newborns and Children for Metabolic Disorders

Contact Information

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	en, Children and Family H nponent Financial Summ	nary					
All dollars shown in thous							
	FY2006 Actuals	FY2007	FY2008 Governor				
	M	lanagement Plan					
Non-Formula Program:							
Component Expenditures:							
71000 Personal Services	2,527.3	3,633.5	4,119.7				
72000 Travel	120.0	132.9	132.9				
73000 Services	3,238.3	3,751.7	3,751.7				
74000 Commodities	582.5	, 151.9	151.9				
75000 Capital Outlay	17.6	0.0	0.0				
77000 Grants, Benefits	384.4	700.0	708.0				
78000 Miscellaneous	0.0	0.0	0.0				
Expenditure Totals	6,870.1	8,370.0	8,864.2				
Funding Sources:							
1002 Federal Receipts	4,096.2	5,929.6	6,254.7				
1003 General Fund Match	356.6	358.3	405.3				
1004 General Fund Receipts	549.7	536.4	601.2				
1007 Inter-Agency Receipts	1,259.3	779.3	819.6				
1156 Receipt Supported Services	608.3	766.4	783.4				
Funding Totals	6,870.1	8,370.0	8,864.2				

Estimated Revenue Collections				
Description	Master Revenue Account	FY2006 Actuals	FY2007 Manageme nt Plan	FY2008 Governor
Unrestricted Revenues				
None.		0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0
Restricted Revenues				
Federal Receipts	51010	4,096.2	5,929.6	6,254.7
Interagency Receipts	51015	1,259.3	779.3	819.6
Receipt Supported Services	51073	608.3	766.4	783.4
Restricted Total		5,963.8	7,475.3	7,857.7
Total Estimated Revenues		5,963.8	7,475.3	7,857.7

Summary of Component Budget Changes From FY2007 Management Plan to FY2008 Governor

Il dollars shown in thousands

	General Funds	Federal Funds	Other Funds	Total Funds
	<u>Ceneral Fanas</u>	r cacrar r anas	Other Funds	<u>Total I alias</u>
FY2007 Management Plan	894.7	5,929.6	1,545.7	8,370.0
Adjustments which will continue				
current level of service:	2.5	0.0	0.0	2.5
-Transfer Nursing Salary Market	3.5	0.0	0.0	3.5
Based Pay	0.4	0.0	0.0	0.0
-FY 08 Health Insurance Increases for Exempt Employees	0.1	0.2	0.0	0.3
Proposed budget increases:				
-2nd Year Fiscal Year (HB109) Newborn Hearing Screening	37.7	-29.7	0.0	8.0
-FY 08 Retirement Systems Rate Increases	70.5	354.6	57.3	482.4
FY2008 Governor	1,006.5	6,254.7	1,603.0	8,864.2

Women, Children and Family Health Personal Services Information				
	Authorized Positions		Personal Services (Costs
	FY2007			
	<u>Management</u>	FY2008		
	<u>Plan</u>	<u>Governor</u>	Annual Salaries	2,493,888
Full-time	43	43	Premium Pay	0
Part-time	1	1	Annual Benefits	1,881,884
Nonpermanent	5	5	Less 5.85% Vacancy Factor	(256,072)
			Lump Sum Premium Pay	Ó
Totals	49	49	Total Personal Services	4,119,700

Position Classification Summary						
Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total	
Accounting Clerk I	1	0	0	0	1	
Accounting Tech II	1	0	0	0	1	
Administrative Clerk II	5	0	0	0	5	
Administrative Clerk III	4	0	0	0	4	
Administrative Supervisor	1	0	0	0	1	
Analyst/Programmer IV	1	0	0	0	1	
Health Program Associate	4	0	0	0	4	
Health Program Mgr I	3	0	0	0	3	
Health Program Mgr II	8	0	0	0	8	
Health Program Mgr III	3	0	1	0	4	
Health Program Mgr IV	1	0	0	0	1	
Nurse Consultant I	1	0	0	0	1	
Nurse Consultant II	3	0	0	0	3	
Public Health Spec II	9	0	0	0	9	
Research Analyst I	1	0	0	0	1	
Staff Physician	1	0	0	0	1	
Statistical Clerk	1	0	0	0	1	
Totals	48	0	1	0	49	